

Applicant:

Michael D. Levison

Serial No.:

09/760,226

Group Art Unit:

Not yet assigned

Filed:

January 12, 2001

Examiner:

Not yet assigned

For:

METHOD FOR TARGETING INSURANCE POLICY INCENTIVE REWARDS

Box Missing Parts Assistant Commissioner for Patents Washington, D.C. 2023l

## TRANSMITTAL OF DECLARATION FOR PATENT APPLICATION, POWER OF ATTORNEY OR AUTHORIZATION OF AGENT, AND STATEMENT UNDER 37 C.F.R. § 3.73(b)

Sir:

Applicant encloses the following for filing in the above-identified application:

- 1. Declaration for Patent Application executed by Michael D. Levison;
- 2. Power of Attorney or Authorization of Agent executed by Coverdell & Company;
- 3. Statement Under 37 C.F.R. § 3.73(b) executed by Coverdell & Company, with attached copy of the executed Assignment from Michael D. Levison to Coverdell & Company; and
- 4. Check in the amount of \$130.00 for the large entity surcharge for late filing the Declaration for Patent Application.

Applicant has not yet received the Notice to File Missing Parts of Nonprovisional Application, or the official Filing Receipt.

U.S.S.N.: 09/760,226
Filed: January 12, 2001
TRANSMITTAL OF DECLARATION FOR
PATENT APPLICATION, POWER OF ATTORNEY
OR AUTHORIZATION OF AGENT, AND
STATEMENT UNDER 37 C.F.R. § 3.73(b)

Please charge any other fees due, or credit any overpayment, in connection with this matter to Deposit Account No. 01-2507. A duplicate of this transmittal is enclosed to facilitate this process.

Respectfully submitted,

Patrea L. Pabst Reg. No. 31,284

Date: February 20, 2001

ARNALL GOLDEN & GREGORY, LLP 2800 One Atlantic Center 1201 West Peachtree Street Atlanta, Georgia 30309-3450 404-873-8794 404-873-8795 (fax) U.S.S.N.: 09/760,226
Filed: January 12, 2001
TRANSMITTAL OF DECLARATION FOR
PATENT APPLICATION, POWER OF ATTORNEY
OR AUTHORIZATION OF AGENT, AND
STATEMENT UNDER 37 C.F.R. § 3.73(b)

## CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8(a)

I hereby certify that this Transmittal of Declaration for Patent Application, Power of Attorney or Authorization of Agent, and Statement Under 37 C.F.R. § 3.73(b), together with any paper referred to as being attached or enclosed, is being deposited with the United States Postal Service on the date shown below with sufficient postage as first-class mail in an envelope addressed to Box Missing Parts, Assistant Commissioner for Patents, Washington, D.C. 20231.

Sunny G. Johns

Date: February 20, 2001

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## **DECLARATION FOR UTILITY OR DESIGN** PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

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Attorney Docket Number		CVC 100					
First Named Inventor		Michael D. Levison					
COMPLETE IF KNOWN							
Application Number		09 /760,226					
Filing Date	Jai	nuary 12, 2001	_				
Group Art Unit							
Examiner Name			_				

As a below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
METHOD FOR TARGETING INSURANCE POLICY INCENTIVE REWARDS								
(Title of the Invention)								
the specification of which								
] is attached hereto OR as United States Application Number or PCT International								
OR as United States Application Number or PCT International was filed on (MM/DD/YYYY) 01/12/2001								
(if applicable).								
Application Number 09/760,220	and was a	mended on (MM/DD/YY)	YY)					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO				
				- 00				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s)	Filing Da	Filing Date (MM/DD/YYYY)		1				
60/175,748	01/12/2000		numbers supplem	al provisional application s are listed on a lental priority data sheet //02B attached hereto.				

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time—you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Washington, DC 20231

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## **DECLARATION** — Utility or Design Patent Application

Direct all correction dence to:	stomer Number Bar Code Label			OR X	Correspondence address below			
Name Patrea L. Pabst, ARNALL GOLDEN & GREGORY, LLP								
Address 1201 West Peachtree Street								
2800 One Atlantic Center								
Atlanta City			State	SA	ZIP 30309			
Country USA	Telephor	ne (404)	873-87	94	Fax (404) 873-8795			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:								
Given Name  (first and middle [if any])  Michael D.  Family Name Levison or Surname					1			
Inventor's Michael Devi Date 30 01								
Residence: City Atlanta State		State G	Country US		Citizenship US			
Mailing Address 210 Landfall Road								
Mailing Address								
City Atlanta	State GA		ZIP 30328		Country US			
NAME OF SECOND INVENTOR:     A petition has been filed for this unsigned inventor								
Given Name Family (first and middle [if any]) or Sur								
Inventor's Signature					Date			
Residence: City State				Country	Citizenship			
Mailing Address								
Mailing Address								
City State			ZIP		Country			
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								